PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

12/20/2007

25670 7590

WILLIAM L. PARADICE, III

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

Certificate of Malling or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and indication of maintenance fees will be mailed to the current correspondence address as miniciated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address, and/or (b) indicates a separate FEE ADDRESS* for DADRESS* for DAD maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

4880 STEVENS CREEK BOULEVARD SUITE 201				States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
SAN JOSE, CA 9	Г	(Depositor's name)								
							(Signaturo)			
							(Date)			
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO			
10/613,628	07/02/2003		Varadarajan Srinivasan		NLMI.P211		4351			
TITLE OF INVENTION.	**************************************									
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1440	\$0	\$ 0		\$1440	03/20/2008			
EXAMINER		ART UNIT	CLASS-SUBCLASS							
WU, JIA		2616	370-235000							
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53) Change of correspondence address (or Change of Correspondence Address form "TOSBI 123 attached "ToSBI 123 attached" in "Fee Address" indication for "FOSBI 47. Rev 03-02 or more recent) attached Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single from (having as a member a							
			3. ASSIGNEE NAME AN	D RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or ty				
			PLEASE NOTE: Unler recordation as set forth	ss an assignee is iden in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the part of the data will appear on the data will appear o	atent. If an assign assignment.	nee is id	entified below, the de	ocument has been filed for
(A) NAME OF ASSIGNEE NetLogic Microsystems, Inc.			(B) RESIDENCE: (CITY and STATE OR COUNTRY) Mountain View, California							
noonogro mr	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		nouncum vi	, саттгоги						
Please check the appropria	te assignee category o	r categories (will not be p	rinted on the patent) :	Individual 🖾 C	orporati	on or other private gro	oup entity Government			
4a The following fre(s) as	e submitted:	4	b. Payment of Fee(s): (Ple	ase first reapply a	ıny prev	lously paid Issue fee	shown above)			
Issue Fee			A check is enclosed.							
Publication Fee (No small entity discount permitted) Advance Order - # of Copies			Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 501914 (enclose an extra copy of this form).							
			overpayment, to Dep	osit Account Numb	er_50	1914 (enclose a	n extra copy of this form).			
 Change in Entity State a. Applicant claims 			☐ b. Applicant is no lo	nger claiming SMA	II. FN	FITY status. See 37 C	FR 1.27(p)(2).			
							ne assignee or other party in			
interest as shown by the re	cords of the United St	ates Patent and Trademar	k Office.		1.01	7				
Authorized Signature	W			Date	161	08				
Typed or printed name				Registration		8,990				
This collection of informa an application Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231 Under the Paperwork Red							d by the USPTO to process ng gathering, preparing, an me you require to complet artment of Commerce, P C for Patents, P.O. Box 1450 number.			